

DEPARTMENT OF HEALTH SERVICES

1515 P STREET
 SACRAMENTO CA 94234-7320



November 22, 1994

(916) 657-2941

TO: All County Welfare Directors
 All County Administrative Officers
 All County Medi-Cal Program Specialists/Liaisons
 All Pickle Coordinators

Letter No.: 94-90

LYNCH V. RANK ANNUAL STUFFER

As required by the Permanent Injunction in the Lynch v. Rank lawsuit, the enclosed stuffer will be sent to individuals in aid codes 14, 17, 24, 27, 64, and 67 in December 1994. Individuals having an "RO" or "QO" indicator on their record will not be receiving this stuffer.

In past years, the plaintiffs' attorneys in this case have received complaints that beneficiaries receiving this stuffer were unable to secure, from the county welfare department (CWD), answers to their questions. This year approximately 165,000 people will be receiving the stuffer, so it is especially critical that clear information be transmitted to those who may call.

Please ensure that all persons in your CWD who may be contacted by someone receiving this stuffer are familiar with the procedures that you have established for determining Medi-Cal eligibility under Lynch v. Rank (Pickle) or other Title II disregard programs such as the Disabled Adult Child(ren)s Program.

Thank you for your assistance. If you have any questions, please contact Sylvia Finberg of my staff at (916) 657-0080.

Sincerely,

ORIGINAL SIGNED BY
 GLENDA ARELLANO for

Frank S. Martucci, Chief
 Medi-Cal Eligibility Branch

Enclosure

SF:gf

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 Policy Section A

Unit Chief: Marlene Ratner/657-0715

PICKLE AMENDMENT IMPORTANT NOTICE REGARDING YOUR MEDI-CAL ELIGIBILITY

You may be eligible for Medi-Cal benefits without a share of cost, if you qualify under the Pickle Amendment. To qualify, **ALL** of the following conditions must apply to you.

1. You currently receive Social Security Title II (RSDI) benefits; and
2. You received or were entitled to receive both RSDI and Title XVI, Supplemental Security Income/State Supplementary Payment (SSI/SSP) benefits simultaneously in any month since April 1977; and
3. You no longer receive SSI/SSP benefits.

If you believe that you are eligible for Medi-Cal under the Pickle Amendment, you should immediately contact your county welfare department eligibility worker.

ENMIENDA DE LEY PICKLE

AVISO IMPORTANTE TOCANTE A SU ELEGIBILIDAD PARA MEDI-CAL

Si califica bajo la Enmienda de Ley Pickle, es posible que califique para los beneficios de Medi-Cal sin tener que pagar una parte del costo. Para calificar, **TODAS** las condiciones a continuación deben aplicar a usted:

1. Actualmente recibe los beneficios del Título II (RSDI) del Seguro Social; y,
2. Recibió o tenía derecho a recibir, simultáneamente, tanto los beneficios del Seguro para Jubilación, Sobrevivientes e Incapacidad (RSDI) como Seguridad de Ingreso Suplemental/Pago Suplementario del Estado (SSI/SSP) provenientes del Título XVI, en cualquier mes desde abril de 1977; y
3. Ya no recibe los beneficios de SSI/SSP.

Si cree que sea elegible para Medi-Cal bajo la Enmienda de Ley Pickle, póngase en contacto con su trabajador de elegibilidad del departamento de bienestar de su condado.